

US BANK/STATE OF UTAH PURCHASING CARD APPLICATION

TYPE OF REQUEST

☐ New Account ☐ Plastic ☐ Non-Plastic ☐ Account Change

APPLICANT INFORMATION

(Please call (801) 537-9243 if any of the information below changes)

First Name _____ MI _____

Last Name _____ Suffix _____

Social Security Number X X X - X X - ____
(last 4 digits required)

Department Name _____

Division Name (Embossed on Card) _____

Current Employment Mailing Address _____

City _____ Zip _____

Work Phone _____ Home Phone _____ Alternate Phone _____

e-mail _____

ACCOUNT INFORMATION

Monthly Credit Limit: _____ Single Transaction Limit: _____

Annual Credit Limit: _____ Quarterly Credit Limit: _____
(optional) (optional)

CHANGE OF ACCOUNT INFORMATION

Account Number _____

Current Name on Card _____

☐ Monthly Credit Limit Change To: \$ _____

☐ Single Transaction Limit Change To: \$ _____

☐ Account Closure Date: _____

☐ Name Change To: _____

☐ Accounting Code Information ☐ Clearing ☐ FINET ☐ Both

☐ Employment Address Change

Former Address: _____

☐ Phone Number Change ☐ Work ☐ Alternate ☐ Home

☐ Other, Explain: _____

SITE COORDINATOR INFORMATION

Site Coordinator Name _____

Department Name _____

Division Name _____

Mailing Address _____
(List if different than applicant's address. All cards are sent to the site coordinator)

City _____ Zip _____

Work Phone _____ Alt. Phone _____

ACCOUNTING INFORMATION

CLEARING ACCOUNT CODING

EXPENSE ACCOUNT CODING

Fund _____ Fund _____

Dept _____ Dept _____

Unit _____ Unit _____

Approp _____ Approp _____

Object _____ Object _____

Activity _____ Activity _____

Function _____ Function _____

Program _____ Program _____

Phase _____ Phase _____

AUTHORIZATION

Applicant Signature _____ Date _____

Applicant Manager Signature _____ Date _____

Site Coordinator Signature _____ Date _____

ePurchasing Office Use Only

Date Application Received _____

Date Application Entered _____

New Account Number _____

Date Authorization Form Returned _____

Date Card Received _____

Date Card Distributed _____

Date of Change _____

State of Utah 03645 35587
Purchasing Card State Contract State
Number Number Number